PTC/SB/06 (08-03)

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USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the inclinidual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 143461 **CLAIMS AS FILED - PART I** OTHER THAN SMALL ENTITY (Column 1) (Column 2) TYPE [OF SMALL ENTITY TOTAL-CLAIMS RATE FEE RATE FEE 24 NUMBER EXTRA BASIC FEI 385.00 BASIC FEE 770.00 FOR NUMBER FILED OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS $_{minus} 3 =$ X43= X86= OR MULTIPLE DEPENDENT CLAIM PRESENT ÷290= +145= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II** OTHER THAN SMALL ENTITY OR **SMALL ENTITY** (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE AMENOMENT AFTER PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR Total Minus XS 9= X\$18= OR Independent Minus *** X86= X43= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-ADDI-8 REMAINING NUMBER PRESENT TIONAL RATE RATE TIONAL AFTER **PREVIOUSLY** ENDMENT **EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus •• X\$18= XS 9= OR Independent Minus X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-Ö REMAINING NUMBER RRESENT TIONAL RATE RATE TIONAL ENOMENT AFTER PREVIOUSLY **EXTRA** AMENDMENT PAID FOR FEE FEE Minus Total X\$ 9= X\$18= OR Independent Minus ₹ X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR ADDIT, FEE "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.